

## Group Census Form

Daniel R. Hawkins  
 Conrade Insurance Group, Inc.  
 PO Box 547  
 Newton, KS 67114-0547

Name of Group:

Address:

SIC Code:

**Print off, complete and fax to 316-283-2444**

	Employee Name	Gender	DOB	City/State of Residence	Zip Code	Coverage Type
1						
2						
3						
4						
5						
6						
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20						
21						
22						
23						
24						
25						

Coverage Type: EE= Employee, ES= Employee & Spouse, EC=Employee & Children,  
 ESC= Family, W=Waived